

South Carolina Department of Health and Environmental Control

Division of Procurement Services Invitation for Bid Amendment No. Three Solicitation No.: IFB: 35612-06/30/2009-JS

Date Issued: July 14, 2009

Procurement Officer: Juanita Shealy, CPPB

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DESCRIPTION: Medicare Desk Audit and Revenue Recovery Services

USING GOVERNMENTAL UNIT: South Carolina Department of Health and Environmental Control

The Term "Offer" Means Your "Bid" or "Proposal". Your offer must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior. See "Submitting Your Offer" provision.

SUBMIT YOUR SEALED OFFER TO E	ITHER OF THE F	OLLOWIN	G ADDI	RESSES:						
MAILING ADDRESS: SC DHEC – Division of Procuremen Bureau of Business Management 2600 Bull Street Columbia, S.C. 29201	t Services	PHYSICAL ADDRESS: SC DHEC – Division of Procurement Services Bureau of Business Management 2600 Bull Street, Room 1200 – Aycock Bldg. Columbia, S.C. 29201								
SUBMIT OFFER BY (Opening Date/Time QUESTIONS MUST BE RECEIVED BY NUMBER OF COPIES TO BE SUBMIT	· ·			(See "Deadline For Submission Of Offer" provision) (See "Questions From Offerors" provision)						
CONFERENCE TYPE: DATE & TIME: (As appropriate, see "Conferences - Pre-Bid/Proposal" & "Sit	e Visit" provisions)		LOCATION:							
AWARD & Award will be posted on August 3, 2009. The award, this solicitation, any amendments, and any related notices will be posted at the following web address: http://www.scdhec.gov/procurement										
You must submit a signed copy of this form with Your Offer. By submitting a bid or proposal, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of thirty (30) calendar days after the Opening Date. (See "Signing Your Offer" and "Electronic Signature" provisions.)										
NAME OF OFFEROR (full legal name of business submitting the offer)		Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.								
AUTHORIZED SIGNATURE		TAXPAYER IDENTIFICATION NO.								
(Person must be authorized to submit binding offer to contrac	et on behalf of Offeror.)	(See "Taxpayer Identification Number" provision)								
TITLE		STATE VENDOR NO.								
(business title of person signing above)		(Register to Obtain S.C. Vendor No. at www.procurement.sc.gov)								
PRINTED NAME	DATE SIGNED	STATE OF INCORPORATION								
(printed name of person signing above)		(If you are a corporation, identify the state of incorporation.)								
OFFEROR'S TYPE OF ENTITY: (Check one) (See "Signing Your Offer" provision.)										
Sole Proprietorship Corporate entity (not tax-exempt)	Partnership Corporation (tax-	-exempt)Other Government entity (federal, state, or local)								

(Daturn Page Two with Vour Offer)

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							NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)						
						Area Code - Number - Extension Facsimile							
									•				
						E-mail Address							
PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)					ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)								
Payment Address same as Home Office Address Payment Address same as Notice Address (check only one)					Order Address same as Home Office Address Order Address same as Notice Address (check only one)								
ACKNOWLEDGMENT OF AMENDMENTS Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)													
Amendment No.	Amendment Date			Am	Date	Amendment No	ö.	Amendment Issue Amer Date		lment No.	Amendment Issue Date		
					-								
DISCOUNT I	DISCOUNT FOR 10 Calendar Days (%) 20 Calend				20 Calenda	ar Days (%) 30 Calendar Days (%) Calendar Day					alendar Days (%)		
(See "Discount fo	PROMPT PAYMENT See "Discount for Prompt												
Payment" clause)													
PREFERENCES - SC RESIDENT VENDOR PREFERENCE (June 2005): Section 11-35-1524 provides a preference for offerors					<u> </u>								
that qualify as a resident vendor. A resident vendor is an offeror that (a) is authorized to transact business within South Carolina, (b)													
maintains an office* in South Carolina, (c) either (1) maintains a													
minimum \$10,000.00 representative inventory at the time of the solicitation, or (2) is a manufacturer which is headquartered and has													
at least a ten million dollar payroll in South Carolina, and the product is made or processed from raw materials into a finished end-product													
by such manufacturer or an affiliate (as defined in Section 1563 of the Internal Revenue Code) of such manufacturer, and (d) has paid			In State Office Address same as Home Office Address										
assessed taxes. If applicable, preference will be applied as required by law.				In-State Office Address same as Notice Address (check only one)									
PREFERENCES - SC/US END-PRODUCT (June 2005): Section 11-35-1524 provides a IF THIS PREFERENCE													

preference to vendors offering South Carolina end-products or US end-products, if those | APPLIES TO THIS products are made, manufactured, or grown in SC or the US, respectively. An endproduct is the item identified for acquisition in this solicitation, including all component parts in final form and ready for the use intended. The terms made, manufactured, and grown are defined by Section 11-35-1524(B). By signing your offer and checking the appropriate space(s) provided and identified on the bid schedule, offeror certifies that the end-product(s) is either made, manufactured or grown in South Carolina, or other states of the United States, as applicable. Preference will be applied as required by law.

PROCUREMENT, PART VII (BIDDING SCHEDULE) WILL INCLUDE A PLACE TO CLAIM THE PREFERENCE. OFFERORS REQUESTING THIS PREFERENCE MUST CHECK THE APPROPRIATE SPACES ON THE BIDDING SCHEDULE.

SCDHEC Solicitation No.: IFB-35612-06/30/2009

AMENDMENTS TO SOLICITATION (DHEC - FEB 2007)

(a) The Solicitation may be amended at any time prior to opening. All actual and prospective Offerors should monitor the following web site for the issuance of Amendments: http://www.scdhec.gov/procurement/

(b) Offerors shall acknowledge receipt of any amendment to this solicitation (1) by signing and returning the amendment, (2) by identifying the amendment number and date in the space provided for this purpose on Page Two, (3) by letter, or (4) by submitting a bid that indicates in some way that the bidder received the amendment.

(c) If this solicitation is amended, then all terms and conditions which are not modified remain unchanged.

OPENING DATE/TIME:

Changed

From: July 14, 2009 at 2:30 p.m. To: July 21, 2009 at 2:30 p.m.

AWARD POSTING DATE: July 20, 2009

Changed

From: July 20, 2009 To: August 3, 2009

MAIL PICKUP (DHEC APR 2009)

The South Carolina Department of Health and Environmental Control picks up all mail from The US Postal Service twice daily around 8:30 a.m. ET and 12:00 p.m. ET (excluding weekends and holidays). See provision entitled Deadline for Submission of Offer.

II. INSTRUCTIONS TO OFFERORS - B. SPECIAL INSTRUCTIONS

<u>INVITATION FOR BIDS</u> SUBMITTED VIA THE SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL'S FACSIMILE MACHINE ARE UNACCEPTABLE.

Invitation for Bids submitted by E-mail are unacceptable.